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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 905.00)

Complete if Known

Application Number	09/646,796-Conf. #1579
Filing Date	November 21, 2000
First Named Inventor	Aravinda Korala
Examiner Name	L. M. Hamilton
Art Unit	3624
Attorney Docket No.	63662(50024)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards & Angell, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>	
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

<u>Small Entity</u>	<u>Fee (\$)</u>
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
- 20 =	x	=		<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
- 3 =	x	=		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2253 Extension for response within third month 510.00
2801 Request for continued examination (RCE) (see 37 ... 395.00)

<u>SUBMITTED BY</u>		<u>Registration No.</u> (Attorney/Agent)	<u>Telephone</u>
Signature	<u>George Chacras</u>	46,608	(401) 276-6653
Name (Print/Type)	George N. Chacras	Date	October 7, 2005



EV711315353US

Application No. (if known): 09/646,796

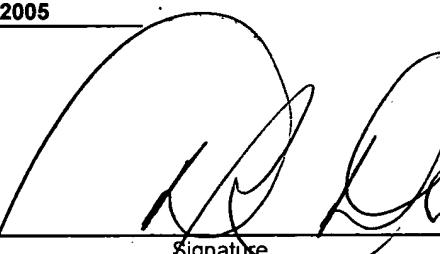
Attorney Docket No.: 63662(50024)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. **EV711315353US** in an envelope addressed to:

MS RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on October 7, 2005
Date



Signature

Donna R. Davis

Typed or printed name of person signing Certificate

Registration Number, if applicable

(401) 276-6633

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

1. Request for Continued Examination Transmittal *in duplicate* (2 pages);
2. Preliminary Amendment (22 pages) together with an Amendment Transmittal Letter *in duplicate* (2 pages);
3. Three Month Request for Extension of Time Under 37 CFR 1.136(a) *in duplicate* (2 pages);
4. Fee Transmittal (1 page);
5. This Certificate of Express Mail; and
6. Return Postcard.

Charge \$905.00 to deposit account 04-1105